

**DECLARATION
Utility Application**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **HEMODILUTION CAP AND METHODS OF USE IN BLOOD-PROCESSING PROCEDURES** the specification of which

(Check One) ☒ is attached hereto OR
☐ was filed on _____ as United States Application Serial No. Not yet assigned or PCT International Application No. _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Date of Filing	Priority Claimed	
			Yes	No

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date	Status-Patented, Pending or Abandoned

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

201	FULL NAME OF INVENTOR	FIRST Name Jeffrey	MIDDLE Initial H.	LAST Name BURBANK	
	RESIDENCE & CITIZENSHIP	City Boxford	State or Foreign Country Massachusetts		Country of Citizenship U.S.A.
	POST OFFICE ADDRESS	18 Sunrise Road	City Boxford	State or Country MA	Zip Code 01921
INVENTOR'S SIGNATURE <u>Jeffrey H Burbank</u> DATE <u>June-5-01</u>					

202	FULL NAME OF INVENTOR	FIRST Name Martin	MIDDLE Initial	LAST Name STILLIG	
	RESIDENCE & CITIZENSHIP	City Dransfeld	State or Foreign Country Germany		Country of Citizenship Germany
	POST OFFICE ADDRESS	Steinweg 12	City Dransfeld	State or Country Germany	Zip Code 37127
INVENTOR'S SIGNATURE <u>M. Stillig</u> DATE <u>06/05/01</u>					

203	FULL NAME OF INVENTOR	FIRST Name James	MIDDLE Initial M.	LAST Name BRUGGER	
	RESIDENCE & CITIZENSHIP	City <u>Newburyport</u> Boxford	State or Foreign Country Massachusetts		Country of Citizenship U.S.A.
	POST OFFICE ADDRESS	<u>50 Hillside Drive</u> <u>4 Savary Street</u>	City <u>Newburyport</u> Newbury Port	State or Country MA	Zip Code 01950
INVENTOR'S SIGNATURE <u>James M Brugger</u> DATE <u>05-Jun-01</u>					